



RECEIVED  
CENTRAL FAX CENTER  
JUL 15 2005

## FACSIMILE TRANSMISSION

TO: Commissioner for Patents

FROM: Chad E. Bement

Attn: Examiner Laurel E. LeFlore  
Patent Examining Corps  
Facsimile Center  
Washington, D.C. 20231

F&L REF. NO.: 035451-0187 (3735.Palm)

Total pages, including cover letter: 16

PTO FAX NUMBER 1.703.872.9306

If you do NOT receive all of the pages, please telephone us at (414) 297-5730, or fax us at (414) 297-4900.

Title of Document(s) Transmitted:

Amendment and Reply Under 37 CFR 1.111

Applicant(s): Hanson et al.  
Serial No.: 10/085,326  
Filed: February 28, 2002  
Group Art Unit: 2673  
F&L Ref. No.: 035451-0187 (3735.Palm)

By: Chad E. Bement  
Name: Chad E. Bement  
Reg. No.: 54,991

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

Roberta A. Cooper  
Roberta A. Cooper

7-15-05  
Date

Atty. Dkt. No. 035451-0187 (3735.Palm)

RECEIVED  
CENTRAL FAX CENTER**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

JUL 15 2005

Applicant: Hanson et al.

Title: COVER FOR ELECTRONIC  
DEVICE

Appl. No.: 10/085,326

Filing Date: 02/28/2002

Examiner: Laurel E. LeFlore

Art Unit: 2673

**CERTIFICATE OF FACSIMILE TRANSMISSION**  
 I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.

Roberta A. Cooper  
 (Printed Name)  
*Roberta A. Cooper*  
 (Signature)

July 15, 2005  
 (Date of Deposit)

**AMENDMENT TRANSMITTAL**

Mail Stop AMENDMENT  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

 Amendment and Reply Under 37 CFR 1.111 (13 pages). The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	27	-	45	= 0	x \$50.00 = \$0.00
Independent Claims:	3	-	4	= 0	x \$200.00 = \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
				CLAIMS FEE TOTAL	= \$0.00

-1-

Application No. 10/085,326

001.1854189.1

PAGE 2/16 \* RCVD AT 7/15/2005 5:31:17 PM [Eastern Daylight Time] \* SVR:USPTO-EXRF-1/3 \* DNI:8729306 \* CSID:4143197016 \* DURATION (mm:ss):04:52

Atty. Dkt. No. 035451-0187 (3735.Palm)

[ ] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> [ ] Extension for response filed within the first month:	\$120.00	\$0.00
<input type="checkbox"/> [ ] Extension for response filed within the second month:	\$450.00	\$0.00
<input type="checkbox"/> [ ] Extension for response filed within the third month:	\$1,020.00	\$0.00
<input type="checkbox"/> [ ] Extension for response filed within the fourth month:	\$1,590.00	\$0.00
<input type="checkbox"/> [ ] Extension for response filed within the fifth month:	\$2,160.00	\$0.00
	<b>EXTENSION FEE TOTAL:</b>	\$0.00
<input type="checkbox"/> [ ] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
	<b>CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:</b>	\$0.00
<input type="checkbox"/> [ ]	<b>Small Entity Fees Apply (subtract ½ of above):</b>	\$0.00
	<b>TOTAL FEE:</b>	\$0.00

[ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 7/15/2005

By Chad E. Bement

FOLEY & LARDNER LLP  
Customer Number: 26371  
Telephone: (414) 297-5554  
Facsimile: (414) 297-4900

Chad E. Bement  
Attorney for Applicant  
Registration No. 54,991

RECEIVED  
CENTRAL FAX CENTER

JUL 15 2005 Atty. Dkt. No. 035451-0187 (3735.Palm)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Hanson et al.

Title: COVER FOR ELECTRONIC DEVICE

Appl. No.: 10/085,326

Filing Date: 02/28/2002

Examiner: Laurel E. LeFlore

Art Unit: 2673

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b>	
I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.	
<u>Roberta A. Cooper</u> (Printed Name)	
<u>Roberta A. Cooper</u> (Signature)	
July 15, 2005 (Date of Deposit)	

**AMENDMENT AND REPLY UNDER 37 CFR 1.111**

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This communication is responsive to the Non-Final Office Action dated April 15, 2005, concerning the above-referenced patent application.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks/Arguments begin on page 6 of this document.

Please amend the application as follows:

001.1818895.1

Application No. 10/085,326